

**BOARD OF BARBERS & COSMETOLOGISTS
RENEWAL APPLICATION FOR BARBERS**

www.cosmetology.mt.gov
dlibsdcos@mt.gov
PO Box 200513
301 S. Park Ave. Fourth Floor
Helena, MT 59620

NAME:	LICENSE#:
ADDRESS:	
CITY/STATE/ZIP	

Please check the following license type you wish to renew:

<input type="checkbox"/> Barber	<input type="checkbox"/> Inactive Instructors	<input type="checkbox"/> Active Instructors
Fee: \$45.00	Fee: \$50.00	Fee: \$60.00

Your Montana license will expire on December 31, 2008

Incomplete renewal forms will be returned and considered not received.

INSTRUCTIONS:

1. Complete this form and return it.
2. Active Instructor licensees must complete the CE Attest Statement below
3. Fees are payable by check or money order made payable to: Board of Barbers & Cosmetologists.
DO NOT SEND CASH
4. Failure to renew **prior to January 1, 2009** will result in your license lapsing.
5. If you fail to renew by the **December 31, 2008** deadline, you may renew your license by completing the same procedure and paying the **additional** late fee equal to 100% of the licensing fee until **February 15, 2009**. **The late fee is non-refundable and non-waivable.**

If name or the preferred mailing address shown above has changed, please complete the following:

Full Name: _____ Phone Number: _____

Preferred Mailing Address: _____

This is my	HOME BUSINESS	Street address	City	State	Zip
	(Circle one)				

CONTINUING EDUCATION ATTEST STATEMENT: Active Instructors only, you are required to complete 30 hours of continuing education (CE) taken within the 24 months prior to December 31.

_____ Yes, I certify that I am in compliance with the CE requirements as stated above and pursuant to Board rule.

I declare under penalty of perjury that the above statement is true and I am aware that a false statement may lead to license discipline.

****NOTICE** All licensees must answer the following question:**

YES NO Have any legal or disciplinary actions been instituted against you since you filed your last
(Circle one) renewal? If so, please attach copies of the document that initiated each action and all final orders. Mont. Code An. Sec. 37-1-105 requires that you report this information. Failure to accurately furnish the information is grounds for denial or revocation.

MILITARY EXEMPTION: Section 37-1-138, MCA, provides for the suspension of collection of license fees, the suspension of continuing education requirements, and the suspension of certain disciplinary actions for persons in military service who affirmatively request that their license be placed on inactive status. Therefore, upon receipt of verification of active military service and submission of this completed form, the Board will place such person's license on inactive status.

I certify that I have read this application and the above information is true and correct, and I have complied with all license requirements.

DATE: _____ SIGNATURE: _____

***** DEADLINE DECEMBER 31, 2008 *****